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Page 1

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: OKLAHOMA

Requirements for Third Party Liability - Payment of Claims

Potential third party payer claims (i.e., diagnosis codes, trauma edits, worker's compensation data exchanges) are reported up to one year from the date of accident or until the cost effective threshold of \$250.00 is met or exceeded. The threshold amount represents that amount necessary to investigate, submit claims to the third party payer and process recoveries.

Recoveries are also pursued when private health insurance coverage has been identified after OHCA has paid claims for a recipient. Medical claims paid by the agency are accumulated to the cost-effective threshold of \$50.00 for private insurance. Paid history is reviewed from the effective date of the insurance or certification date, but not to exceed one year. If the claim payments are equal to or greater than the threshold, the claim information is submitted to the insurance carrier for reimbursement under the scope of their contractual agreement, but not to exceed the OHCA paid amount.

The threshold amounts of \$250.00 for casualty claims and \$50.00 for health insurance are in compliance with amounts specified in the State Medicaid Manual, Chapter 3, Section 3904.5.

Claims are accumulated for one year from the date of the accident on casualty claims or until the threshold amount of \$250.00 is met.

Claims are reviewed retroactively to the effective date of the insurance coverage or certification date, but not to exceed one year and claims to the insurance carrier are submitted if the \$50.00 threshold is met.

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